UNITED STATES PATENT & TRADEMARK FICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND					
1 Date of Request 2 8 2 2 Serial/Patent #					
Please refund the following fee(s):		4 PAPE NUME		5 DATE FILED	6 AMOUNT
Filing					\$
	Amendment				\$
	Extension of Time				\$
	Notice of Appeal/Appeal				\$
	Petition				\$
	Issue				\$
	Cert of Correction/Terminal Disc.				\$
	Maintenance				\$
	Assignment				\$
	Other				\$
		7 TOTAL AMOUNT OF REFUND \$			\$
		8 TO BE REFUNDED BY:			
10 REASON:		Treasury Check			
	Overpayment			Credit De	posit A/C #:
	Duplicate Payment		9		
 	No Fee Due (Explanation):				
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME:				TITLE:	
SIGNATURE:					
OFFICE: ***********************************					
APPROVED: DATE:					
H					

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

PORM PTO 1577 (01/90) Office of Finance Refund Branch Crystal Park One, Room 802B